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<b>NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES</b>		Docket Number (Optional) <b>284502000600</b>
In re Application of Halle MORTON et al.		
Application Number <b>09/889,867</b>		Filed <b>(Int'l) January 20, 2000</b>
For <b>COMBINATION CHAPERONIN 10 AND BETA-INTERFERON THERAPY FOR MULTIPLE SCLEROSIS (AMENDED)</b>		
Art Unit <b>1647</b>		Examiner <b>J. Seharaseyon</b>

Applicant hereby **appeals** to the Board of Patent Appeals and Interferences from the last decision of the examiner.

The fee for this Notice of Appeal is (37 CFR 41.20(b)(1)) \$ 500.00

☒ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ 250.00

☐ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.

☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 03-1952 ~~I have enclosed a duplicate copy of this sheet. Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate.~~

☒ A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.

I am the

☐ applicant /inventor.

☐ assignee of record of the entire interest.  
See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

☒ attorney or agent of record.  
Registration number 38,440

☐ attorney or agent acting under 37 CFR 1.34.  
Registration number if acting under 37 CFR 1.34. \_\_\_\_\_

\_\_\_\_\_  
/Gregory P. Einhorn/  
Signature

\_\_\_\_\_  
Gregory P. Einhorn  
Typed or printed name

\_\_\_\_\_  
(858) 720-5133  
Telephone number

\_\_\_\_\_  
June 11, 2007  
Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

<input checked="" type="checkbox"/> *Total of <u>1</u> forms are submitted.
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